31-	Ë
R.C.	3517.10(B)

Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

Event Date	5-22-09
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	Prescribed by Secretary	or state 05/05		
ame of Committee in Full				
Citizens for Frank Ciotola			Registration Number, if PAC	
ull Name of Contributor			Registration (value), 2 2	
lames G. Sicaras			M D Y Amount	
treet Address	Employer/Occupation/Labor Organization*		0 5 2 2 0 9 \$100.00	
P.O. Box 21562	Sta te Zip Code		Form (Cash, Check, etc.)	
ity	Stal te OH	43221-1562	Check	
Columbus	UII.	7)231 100	Registration Number, if PAC	
ull Name of Contributor	•		, ,	
Karen P. Hopper	" " L- Occasionismion*		M D Y Amount	
treet Address	Employer/Occupation/Labor Organization*		0 5 2 2 0 9 \$250.00	
1731 Ramblewood Ave.	Stal te Zip Code		Form (Cash, Check, etc.)	
ity	OH	43235	Check	
Columbus		1020	Registration Number, if PAC	
Full Name of Contributor				
Edward R. Knezevich	Employer/Occupation/Labor Organization*		M D Y Amount	
Street Address	Employer/Occupa	MON PROOF CYBANAL	0 5 2 2 0 9 \$100.00	
P.O. Box 1890	Sta te Zip Code		Form (Cash, Check, etc.)	
City	OH	43086-1890	Check	
Westerville	LON	70000 2030	Registration Number, if PAC	
Full Name of Contributor				
Bruno Ciotola	Employer/Occupation/Labor Organization*		M D Y Amount	
Street Address	Employer/Occupation Labor Organic		0 5 2 2 0 9 \$100.00	
7182 Temperance Point Place	Sta te	Zip Code	Form (Cash, Check, etc.)	
City	ОН	43082	Cash	
Westerville			Registration Number, if PAC	
Full Name of Contributor			M D Y Amount	
Joanne Policaro	Employer/Occupation/Labor Organization*		M 1	
Street Address 4311 Randmore Rd.			052209 \$100.00	
	Sta te	Zip Code	Form (Cash, Check, etc.)	
city Columbus	OH	43220	Cash	
Full Name of Contributor		A CONTRACTOR OF THE CONTRACTOR	Registration Number, if PAC	
			M D Y Amount	
Jim Becker Street Address	Employer/Occupation/Labor Organization*			
4380 Braunton Rd.			0 5 2 2 0 9 \$75.00 Form (Cash, Check, etc.)	
	Sta te	Zip Code		
city Columbus	OH	43220	Cash Registration Number, if PAC	
Full Name of Contributor			Registration Minioti, 1777	
			M D Y Amount	
Dean Carnavale Street Address	Employer/Occu	pation/Labor Organization*	170	
3600 Grafton Ave.			O 5 2 2 0 9 \$75.00 Form (Cash, Check, etc.)	
	Sta te	Zip Code		
City	OH	43220	Cash Library and the name	
Columbus * Required for contributions from individuals over \$100 to state the contributions from the complex should be a state of the contributions of the	ewide and General A	Assembly candidates. If contribu	tor is self-employed, the occupation and the name roll deduction and exceed the aggregate of \$100.	

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from Form No. 31-E" and list the date of the event in the date column

Total	contributions	this	event

Total expenditures this event.

\$0.00

\$800.00 \$0.00 Page Total \$

the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]